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PTO/SB/22 (10-04)

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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 10253-00136-US	
Application Number 09/727,207-Conf. #2829	Filed November 30, 2000		
For STITCHED PILE SURFACE STRUCTURE			
Art Unit 1733	Examiner J. L. Goff		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	Fee \$110.00	Small Entity Fee \$55.00	\$ 110.00
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00	\$
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00	\$
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00	\$
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00	\$
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0185</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1.34(a) <u>47,341</u>			
Signature <u>Myron Keith Wyche</u> Date <u>November 29, 2004</u>			
Typed or printed name <u>Myron Keith Wyche</u> Telephone Number <u>(202) 331-7111</u>			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of <u>1</u> forms are submitted.			